

HUMAN SERVICES DEPARTMENT[441]

Rules transferred from Social Services Department[770] to Human Services Department[498],
see 1983 Iowa Acts, Senate File 464, effective July 1, 1983.

Rules transferred from agency number [498] to [441] to conform with the reorganization
numbering scheme in general, IAC Supp. 2/11/87.

TITLE I		3.9(17A)	Variance between adopted rule and published notice of proposed rule adoption
GENERAL DEPARTMENTAL PROCEDURES		3.10(17A)	Exemptions from public rule-making procedures
CHAPTER 1		3.11(17A)	Concise statement of reasons
DEPARTMENTAL ORGANIZATION		3.12(17A)	Contents, style, and form of rule
AND PROCEDURES		3.13(17A)	Department rule-making record
1.1(17A)	Director	3.14(17A)	Filing of rules
1.2(17A)	Council	3.15(17A)	Effectiveness of rules prior to publication
1.3(17A)	Organization at state level	3.16(17A)	Review by department of rules
1.4(17A)	Organization at local level	CHAPTER 4	
1.5	Reserved	PETITIONS FOR RULE MAKING	
1.6(17A)	Mental health and mental retardation commission	4.1(17A)	Petition for rule making
1.7(17A)	Governor's developmental disabilities council (governor's DD council)	4.2(17A)	Briefs
1.8(217)	Exceptions	4.3(17A)	Inquiries
1.9	Reserved	4.4(17A)	Agency consideration
1.10(17A)	HAWK-I board	CHAPTER 5	
CHAPTER 2		DECLARATORY ORDERS	
CONTRACTING OUT DEPARTMENT OF HUMAN SERVICES EMPLOYEES AND PROPERTY		5.1(17A)	Petition for declaratory order
2.1(23A,225C)	Definitions	5.2(17A)	Notice of petition
2.2(23A,225C)	Contracts for use of the services of department employees	5.3(17A)	Intervention
2.3(23A,225C)	Contract provisions	5.4(17A)	Briefs
2.4(23A,225C)	Leasing of space at state institutions	5.5(17A)	Inquiries
2.5(23A,225C)	Requirements prior to leasing	5.6(17A)	Service and filing of petitions and other papers
CHAPTER 3		5.7(17A)	Consideration
DEPARTMENT PROCEDURE FOR RULE MAKING		5.8(17A)	Action on petition
3.1(17A)	Applicability	5.9(17A)	Refusal to issue order
3.2(17A)	Advice on possible rules before notice of proposed rule adoption	5.10(17A)	Contents of declaratory order—effective date
3.3(17A)	Public rule-making docket	5.11(17A)	Copies of orders
3.4(17A)	Notice of proposed rule making	5.12(17A)	Effect of a declaratory order
3.5(17A)	Public participation	CHAPTER 6	
3.6(17A)	Regulatory analysis	Reserved	
3.7(17A,25B)	Fiscal impact statement	CHAPTER 7	
3.8(17A)	Time and manner of rule adoption	APPEALS AND HEARINGS	
		7.1(17A)	Definitions
		7.2(17A)	Application of rules
		7.3(17A)	The administrative law judge
		7.4(17A)	Publication and distribution of hearing procedures
		7.5(17A)	The right to appeal

- 7.6(17A) Informing persons of their rights
- 7.7(17A) Notice of intent to approve, deny, terminate, reduce, or suspend assistance or deny reinstatement of assistance
- 7.8(17A) Opportunity for hearing
- 7.9(17A) Continuation of assistance pending a final decision on appeal
- 7.10(17A) Procedural considerations
- 7.11(17A) Information and referral for legal services
- 7.12(17A) Subpoenas
- 7.13(17A) Rights of appellants during hearings
- 7.14(17A) Limitation of persons attending
- 7.15(17A) Medical examination
- 7.16(17A) The appeal decision
- 7.17(17A) Exhausting administrative remedies
- 7.18(17A) Ex parte communication
- 7.19(17A) Accessibility of hearing decisions
- 7.20(17A) Right of judicial review and stays of agency action
- 7.21(17A) Food stamp hearings and appeals
- 7.22(17A) FIP disqualification hearings
- 7.23(17A) No factual dispute contested cases
- 7.24(17A) Emergency adjudicative proceedings

CHAPTER 8

PAYMENT OF SMALL CLAIMS

- 8.1(217) Authorization to reimburse

CHAPTER 9

PUBLIC RECORDS AND FAIR INFORMATION PRACTICES

- 9.1(17A,22) Definitions
- 9.2(17A,22) Statement of policy
- 9.3(17A,22) Requests for access to records
- 9.4(17A,22) Access to confidential records
- 9.5(17A,22) Requests for treatment of a record as a confidential record and its withholding from examinations
- 9.6(17A,22) Procedure by which additions, dissents, or objections may be entered into certain records
- 9.7(17A,22,228) Consent to disclosure by the subject of a confidential record
- 9.8(17A,22) Notice to suppliers of information
- 9.9(17A,22) Release to subject

- 9.10(17A,22) Disclosure without consent of the subject
- 9.11(22) Availability of records
- 9.12(22,252G) Personally identifiable information
- 9.13(217) Distribution of informational materials

CHAPTER 10

INDIVIDUAL DEVELOPMENT ACCOUNTS

- 10.1(541A) Definitions
- 10.2(541A) Establishment of individual development accounts
- 10.3(541A) Reserve pool
- 10.4(541A) Eligibility, savings refunds and state tax provisions
- 10.5(541A) Administration of the initial period
- 10.6(541A) Requests for proposals—operation of IDAs
- 10.7(541A) Authorized withdrawals of principal and income
- 10.8(541A) Notice of nonapproved withdrawals and closure of the account
- 10.9(541A) Transfers of assets of an account holder's individual development account

CHAPTER 11

OVERPAYMENTS

- 11.1(217,421) Definitions
- 11.2(217,421) Accounts
- 11.3(217,421) Application of payment
- 11.4(217,421) Setoff against state income tax refund, rebate, or other state payments, including, for example, state employee wages
- 11.5(234) Setoff against federal income tax refund or other federal payments, including, for example, federal employee wages

CHAPTER 12

VOLUNTEER SERVICES

- 12.1(234) Definition
- 12.2(234) Allocation of block grant funds
- 12.3(234) Requirements for volunteers
- 12.4(234) Volunteer service programs
- 12.5(234) Services and benefits available to volunteers

CHAPTER 13

PROGRAM EVALUATION

- 13.1(234,239,249A) Definitions
- 13.2(234,239,249A) Review of public assistance records by the department
- 13.3(234,239,249A) Who shall be reviewed
- 13.4(234,239,249A) Notification of review
- 13.5(234,239,249A) Review procedure
- 13.6(234,239,249A) Failure to cooperate
- 13.7(234,239,249A) Report of findings
- 13.8(234,239,249A) Federal rereview

CHAPTER 14

OFFSET OF COUNTY DEBTS
OWED DEPARTMENT

- 14.1(234) Definitions
- 14.2(234) Identifying counties with liabilities
- 14.3(234) List of counties with amounts owed
- 14.4(234) Notification to county regarding offset
- 14.5(234) Review of county response regarding offset
- 14.6(234) Offset completed

TITLE II
Reserved

CHAPTERS 15 to 21

Reserved

TITLE III

MENTAL HEALTH

CHAPTER 22

STANDARDS FOR SERVICES TO
PERSONS WITH MENTAL ILLNESS,
CHRONIC MENTAL ILLNESS, MENTAL
RETARDATION, DEVELOPMENTAL
DISABILITIES, OR BRAIN INJURY

- 22.1(225C) Definitions
- 22.2(225C) Principles
- 22.3(225C) General guidelines for service delivery
- 22.4(225C) Services
- 22.5(225C) Compliance hearing

CHAPTER 23

Reserved

CHAPTER 24

ACCREDITATION OR CERTIFICATION
OF PROVIDERS OF SERVICES TO
PERSONS WITH MENTAL ILLNESS,
MENTAL RETARDATION, AND
DEVELOPMENTAL DISABILITIES

DIVISION I

STATE ACCREDITATION OF CASE MANAGEMENT,
COMMUNITY MENTAL HEALTH CENTERS,
COMMUNITY SUPPORTED LIVING ARRANGEMENTS,
AND OTHER MENTAL HEALTH SERVICE PROVIDERS

- 24.1(225C) Definitions
- 24.2(225C) Standards for organizational activities
- 24.3(225C) Standards for specific services
- 24.4(225C) Accreditation
- 24.5(225C) Deemed status
- 24.6(225C) Complaint process
- 24.7(225C) Appeals
- 24.8 to 24.20 Reserved

DIVISION II

PILOT PROJECT FOR CERTIFICATION OF SERVICES
FOR PERSONS WITH MENTAL ILLNESS, MENTAL
RETARDATION, DEVELOPMENTAL DISABILITIES,
AND BRAIN INJURY

- 24.21(76GA, ch1213, 135C, 225C, 249A) Definitions
- 24.22(76GA, ch1213, 135C, 225C, 249A) Organizations to be certified
- 24.23(76GA, ch1213, 135C, 225C, 249A) Certification process
- 24.24(76GA, ch1213, 135C, 225C, 249A) Outcome-based performance standards
- 24.25(76GA, ch1213, 135C, 225C, 249A) Restrictive procedure guidelines
- 24.26(76GA, ch1213, 135C, 225C, 249A) Outcome-based performance standards for specific services
- 24.27(76GA, ch1213, 135C, 225C, 249A) Appeals

CHAPTER 25
DISABILITY SERVICES
MANAGEMENT

DIVISION I
DETERMINATION OF STATE
PAYMENT AMOUNT

- 25.1(331) Definitions
- 25.2(331) Eligibility conditions
- 25.3(331) County expenditure reports
- 25.4(331) State payment calculation report
- 25.5 to 25.10 Reserved

DIVISION II
COUNTY MANAGEMENT PLAN

- 25.11(331) Definitions
- 25.12(331) County management plan—
general criteria
- 25.13(331) Policies and procedures manual
- 25.14(331) Policies and procedures manual
review
- 25.15(331) Amendments
- 25.16(331) Reconsideration
- 25.17(331) Management plan annual review
- 25.18(331) Strategic plan
- 25.19(331) Technical assistance
- 25.20 to 25.40 Reserved

DIVISION III
MINIMUM DATA SET

- 25.41(331) Minimum data set
- 25.42 to 25.50 Reserved

DIVISION IV
INCENTIVE AND EFFICIENCY POOL FUNDING

- 25.51(77GA,HF2545) Desired results areas
- 25.52(77GA,HF2545) Methodology for
applying for
incentive funding
- 25.53(77GA,HF2545) Methodology for
awarding incentive
funding
- 25.54(77GA,HF2545) Subsequent year
performance factors
- 25.55(77GA,HF2545) Phase-in provisions
- 25.56 to 25.60 Reserved

DIVISION V
RISK POOL FUNDING

- 25.61(426B) Definitions
- 25.62(426B) Risk pool board
- 25.63(426B) Application process
- 25.64(426B) Methodology for awarding risk
pool funding
- 25.65(426B) Repayment provisions
- 25.66(426B) Appeals

CHAPTERS 26 and 27
Reserved

CHAPTER 28
POLICIES FOR ALL INSTITUTIONS

- 28.1(218) Definitions
- 28.2(218) Voluntary admissions to mental
health institute
- 28.3(218) Admission to hospital-schools
- 28.4(229) Patients' rights for the mentally
ill
- 28.5(218) Photographing and recording of
patients and use of cameras
- 28.6(218) Interviews and statements
- 28.7(218) Use of grounds, facilities, or
equipment
- 28.8(218) Tours of institution
- 28.9(218) Donations
- 28.10(218) Residents' rights for the mentally
retarded
- 28.11(218) Catchment areas
- 28.12(217) Release of confidential
information

CHAPTER 29
MENTAL HEALTH INSTITUTES

- 29.1(218) Visiting
- 29.2(230) Direct medical services
- 29.3(230) Liability for support

CHAPTER 30
STATE HOSPITAL-SCHOOLS

- 30.1(218) Visiting
- 30.2(222) Liability for support

CHAPTERS 31 to 33

Reserved

CHAPTER 34

ALTERNATIVE DIAGNOSTIC FACILITIES

34.1(225C) Definitions

34.2(225C) Function

34.3(225C) Standards

CHAPTERS 35 to 37

Reserved

CHAPTER 38

DEVELOPMENTAL DISABILITIES

BASIC STATE GRANT

38.1(225C,217) Definitions

38.2(225C,217) Program eligibility

38.3(225C,217) Application under
competitive process

38.4(225C,217) Competitive project awards

38.5(225C,217) Sole source or emergency
selection project awards

38.6(225C,217) Field-initiated proposals

38.7(225C,217) Notification

38.8(225C,217) Request for reconsideration

38.9(225C,217) Contracts

38.10 Reserved

38.11(225C,217) Reallocation of funds

38.12(225C,217) Conflict of interest policy

CHAPTER 39

MENTAL ILLNESS SPECIAL
SERVICES FUND

DIVISION I

39.1 to 39.20 Reserved

DIVISION II

CONSTRUCTION AND START-UP COSTS

39.21(225C) Definitions

39.22(225C) Distribution of funds

39.23(225C) State grant application process

39.24(225C) Contracts

39.25(225C) Records

39.26(225C) Evaluation

39.27(225C) Conflict of interest

39.28(225C) Appeals

39.29(225C) Stewart B. McKinney
application process

TITLE IV

FAMILY INVESTMENT PROGRAM

CHAPTER 40

APPLICATION FOR AID

DIVISION I

40.1 to 40.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM—
TREATMENT GROUP

40.21(239B) Definitions

40.22(239B) Application

40.23(239B) Date of application

40.24(239B) Procedure with application

40.25(239B) Time limit for decision

40.26(239B) Effective date of grant

40.27(239B) Continuing eligibility

40.28(239B) Referral for investigation

40.29(239B) Conversion to the X-PERT
system

CHAPTER 41

GRANTING ASSISTANCE

DIVISION I

41.1 to 41.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM—
TREATMENT GROUP41.21(239B) Eligibility factors specific to
child41.22(239B) Eligibility factors specific to
payee41.23(239B) Home, residence, citizenship,
and alienage41.24(239B) Promoting independence and
self-sufficiency through
employment job opportunities
and basic skills (PROMISE
JOBS) program41.25(239B) Uncategorized factors of
eligibility

41.26(239B) Resources

41.27(239B) Income

41.28(239B) Need standards

41.29(239B) Composite FIP/SSI cases

CHAPTER 42 UNEMPLOYED PARENT

DIVISION I

42.1 to 42.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM— TREATMENT GROUP

42.21(239) Definitions

42.22(239) Deprivation

42.23 Reserved

42.24(239) Eligibility

42.25(77GA,SF516) Not considered
unemployed

42.26 and 42.27 Reserved

42.28(239) Assistance continued

CHAPTER 43 ALTERNATE PAYEES

DIVISION I

43.1 to 43.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM— TREATMENT GROUP

43.21(239) Conservatorship or guardianship

43.22(239) Protective payments

43.23(239) Vendor payments

43.24(239) Emergency payee

CHAPTER 44 Reserved

CHAPTER 45 PAYMENT

DIVISION I

45.1 to 45.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM— TREATMENT GROUP

45.21(239) Address

45.22(239) Return

45.23(239) Held warrants

45.24(239) Underpayment

45.25(239) Deceased payees

45.26(239) Limitation on payment

45.27(239) Rounding of need standard and
payment amount

CHAPTER 46 OVERPAYMENT RECOVERY

DIVISION I

46.1 to 46.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM— TREATMENT GROUP

46.21(239) Definitions

46.22(239) Monetary standards

46.23(239) Notification and appeals

46.24(239B) Determination of overpayments

46.25(239) Source of recoupment

46.26 Reserved

46.27(239) Procedures for recoupment

46.28(239) Intentional program violation

46.29(77GA,SF516) Fraudulent
misrepresentation of
residence

CHAPTER 47 PILOT DIVERSION INITIATIVES

DIVISION I

PILOT FIP-APPLICANT DIVERSION PROGRAM

- 47.1(239B) Definitions
- 47.2(239B) Availability of program
- 47.3(239B) General criteria
- 47.4(239B) Assistance available
- 47.5(239B) Relationship to the family investment program and TANF
- 47.6(239B) Local plans
- 47.7(239B) Notification and appeals
- 47.8(239B) Funding, rates and method of payment
- 47.9(239B) Termination of pilot projects
- 47.10(239B) Records and reports
- 47.11(239B) Renewal of existing approved pilot projects
- 47.12 to 47.20 Reserved

DIVISION II

FAMILY SELF-SUFFICIENCY GRANTS PROGRAM

- 47.21(239B) Definitions
- 47.22(239B) Availability of the family self-sufficiency grants program
- 47.23(239B) General criteria
- 47.24(239B) Assistance available in family self-sufficiency grants
- 47.25(239B) Application, notification, and appeals
- 47.26(239B) Approved local plans for family self-sufficiency grants
- 47.27 to 47.40 Reserved

DIVISION III

PILOT COMMUNITY SELF-SUFFICIENCY GRANTS PROGRAM

- 47.41(239B) Definitions
- 47.42(239B) Availability of the community self-sufficiency grants program
- 47.43(239B) General criteria
- 47.44(239B) Assistance available under community self-sufficiency grants
- 47.45(239B) Approved pilot project plans
- 47.46(239B) Notification and appeals for community self-sufficiency grant projects
- 47.47(239B) Termination of pilot projects
- 47.48(239B) Records and reports
- 47.49(239B) Renewal of existing approved pilot projects
- 47.50 to 47.60 Reserved

DIVISION IV

PILOT POST-FIP DIVERSION PROGRAM

- 47.61(239B) Definitions
- 47.62(239B) Submitting proposals
- 47.63(239B) Project administration
- 47.64(239B) Availability of program
- 47.65(239B) General criteria
- 47.66(239B) Assistance available
- 47.67(239B) Local plans
- 47.68(239B) Notification and appeals
- 47.69(239B) Funding, rates and method of payment
- 47.70(239B) Termination of pilot projects
- 47.71(239B) Records and reports
- 47.72(239B) Renewal of existing approved pilot projects

CHAPTER 48

FAMILY INVESTMENT PROGRAM ELIGIBILITY UNDER SELF-EMPLOYMENT DEMONSTRATION PROJECTS

DIVISION I

- 48.1 to 48.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM— TREATMENT GROUP

- 48.21(249C) Pilot project site selection criteria
- 48.22(249C) Program area
- 48.23(249C) Family investment program eligibility

CHAPTER 49

TRANSITIONAL CHILD CARE ASSISTANCE PROGRAM

DIVISION I

- 49.1 to 49.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM— TREATMENT GROUP

- 49.21(239B) Eligibility for transitional child care
- 49.22(239B) Eligible children
- 49.23(239B) Child care facilities eligible to participate
- 49.24(239B) Effective date of eligibility
- 49.25(239B) Reasons for ineligibility for transitional child care assistance
- 49.26(239B) Income
- 49.27(239B) Copayments

- 49.28(239B) Copayment requirement
- 49.29(239B) Billing procedures
- 49.30(239B) Payment
- 49.31(239B) Termination of eligibility
- 49.32(239B) Notification and appeals
- 49.33(239B) Overpayments and recovery
- 49.34(239B) Families transitioned from the
state-funded transitional child
care assistance program
- 49.35(239B) Waiting lists
- 49.36(239B) Termination of program

TITLE V

STATE SUPPLEMENTARY ASSISTANCE

CHAPTER 50

APPLICATION FOR ASSISTANCE

- 50.1(249) Definitions
- 50.2(249) Application procedures
- 50.3(249) Approval of application and
effective date of eligibility
- 50.4(249) Reviews
- 50.5(249) Application under conditional
benefits

CHAPTER 51

ELIGIBILITY

- 51.1(249) Application for other benefits
- 51.2(249) Supplementation
- 51.3(249) Eligibility for residential care
- 51.4(249) Dependent relatives
- 51.5(249) Residence
- 51.6 Reserved
- 51.7(249) Income from providing room and
board
- 51.8(249) Furnishing of social security
number
- 51.9(249) Recovery

CHAPTER 52

PAYMENT

- 52.1(249) Assistance standards

CHAPTER 53

RENT SUBSIDY PROGRAM

- 53.1(78GA,ch203) Definitions
- 53.2(78GA,ch203) Eligibility requirements
- 53.3(78GA,ch203) Application
- 53.4(78GA,ch203) Amount of rent subsidy
- 53.5(78GA,ch203) Redetermination of
eligibility
- 53.6(78GA,ch203) Termination of rent
subsidy payments
- 53.7(78GA,ch203) Fraudulent practices
relating to the rent
subsidy program
- 53.8(78GA,ch203) Appeals

CHAPTER 54

FACILITY PARTICIPATION

- 54.1(249) Application and contract
agreement
- 54.2(249) Maintenance of case records
- 54.3(249) Financial and statistical report
- 54.4(249) Goods and services provided
- 54.5(249) Personal needs account
- 54.6(249) Case activity report
- 54.7(249) Billing procedures
- 54.8(249) Audits

TITLE VI

GENERAL PUBLIC ASSISTANCE PROVISIONS

CHAPTER 55

Reserved

CHAPTER 56

BURIAL BENEFITS

- 56.1(239,249) Application
- 56.2(239,249) Categorical eligibility
- 56.3(239,249) Determination of benefit
amount
- 56.4(239,249) Claim for payment

CHAPTER 57

INTERIM ASSISTANCE

REIMBURSEMENT

- 57.1(249) Definitions
- 57.2(249) Requirements for reimbursement
- 57.3(249) Audits by the department of
human services
- 57.4(249) Independent audits
- 57.5(249) Withholding of funds
- 57.6(249) Notice of interim assistance
reimbursement eligibility and
accountability
- 57.7(249A) Certification of authority

CHAPTER 58

EMERGENCY ASSISTANCE PROGRAM

DIVISION I

- 58.1 to 58.20 Reserved

DIVISION II

FAMILY INVESTMENT PROGRAM—
TREATMENT GROUP

- 58.21(234) Definitions
- 58.22(234) General provisions
- 58.23(234) Application procedures
- 58.24(234) Eligibility requirements
- 58.25(234) Determination of need
- 58.26(234) Income
- 58.27(234) Resources
- 58.28(234) Payment
- 58.29(234) Notification and appeals

58.30(234)	Discontinuance of the emergency assistance program	61.14(217)	Unaccompanied refugee minors program
58.31(234)	Special information received from emergency assistance clients	61.15(217,622A)	Interpreters and translators for legal proceedings
	CHAPTER 59		CHAPTERS 62 to 64
	Reserved		Reserved
	CHAPTER 60		TITLE VII
	REFUGEE CASH ASSISTANCE		FOOD STAMP PROGRAM
60.1(217)	Alienage requirements		CHAPTER 65
60.2(217)	Application procedures	65.1(234)	ADMINISTRATION
60.3(217)	Effective date of grant	65.2(234)	Definitions
60.4(217)	Accepting other assistance	65.3(234)	Application
60.5(217)	Eligibility factors	65.4(234)	Administration of program
60.6(217)	Students in institutions of higher education	65.5	Issuance
60.7(217)	Time limit for eligibility	65.6(234)	Reserved
60.8(217)	Criteria for exemption from registration for employment services, registration, and refusal to register	65.7(234)	Delays in certification
60.9(217)	Work and training requirements	65.8(234)	Expedited service
60.10(217)	Uncategorized factors of eligibility	65.9(234)	Deductions
60.11(217)	Temporary absence from home		Treatment centers and group living arrangements
60.12(217)	Application	65.10(234)	Reporting changes
60.13(217)	Continuing eligibility	65.11(234)	Discrimination complaint
60.14(217)	Alternate payees	65.12(234)	Appeals
60.15(217)	Payment	65.13(234)	Joint processing
60.16(217)	Overpayment recovery	65.14	Reserved
	CHAPTER 61	65.15(234)	Proration of benefits
	REFUGEE SERVICE PROGRAM	65.16(234)	Complaint system
61.1(217)	Definitions	65.17(234)	Involvement in a strike
61.2(217)	Authority	65.18	Reserved
61.3	Reserved	65.19(234)	Monthly reporting/retrospective budgeting
61.4(217)	Planning and coordinating the placement of refugees in advance of their arrival	65.20(234)	Notice of expiration issuance
61.5(217)	Services of the department available for refugees	65.21(234)	Claims
61.6(217)	Provision of services	65.22(234)	Verification
61.7(217)	Application for services	65.23(234)	Weekly or biweekly income and prospective budgeting
61.8(217)	Adverse service actions	65.24(234)	Inclusion of foster children in household
61.9(217)	Client appeals	65.25(234)	Effective date of change
61.10(217)	Refugee sponsors	65.26	Reserved
61.11(217)	Adverse actions regarding sponsor applications	65.27(234)	Voluntary quit or reduction in hours of work
61.12(217)	Administrative review of denial of sponsorship application	65.28(234)	Work requirements
61.13(217)	Refugee resettlement moneys	65.29(234)	Income
		65.30(234)	Resources
		65.31(234)	Homeless meal providers
		65.32(234)	Basis for food stamp allotments
		65.33(234)	Maximum monthly dependent care deduction
		65.34 and 65.35	Reserved

65.36(234) Electronic benefit transfer (EBT)
of food stamp benefits
65.37(234) Student eligibility
65.38(234) Income deductions
65.39(234) Categorical eligibility
65.40 Reserved
65.41(234) Actions on changes increasing
benefits
65.42(234) Work transition period
65.43(234) Household composition
65.44(234) Reinstatement
65.45(234) Conversion to the X-PERT
system
65.46(234) Disqualifications
65.47(234) Eligibility of noncitizens
65.48(234) Sponsored aliens
65.49(234) Providing information to law
enforcement officials
65.50(234) No increase in food stamp
benefits

CHAPTERS 66 to 72
Reserved

CHAPTER 73
COMMODITY DISTRIBUTION
PROGRAMS

FEDERAL SURPLUS FOOD PROGRAM

73.1(234) Definitions
73.2(234) Priority of distribution
73.3(234) Agreements
73.4(234) Household eligibility
73.5(234) Notification of available food
73.6(234) Household certification
procedure
73.7(234) Distribution to households
73.8(234) Emergency feeding operations,
charitable institutions and
corrections facilities
eligibility
73.9(234) Distribution requirements
73.10(234) Quality control and recoupment
73.11(234) Administrative review of denial
of eligibility
73.12(234) Payment of storage and
distribution costs
73.13(234) Food losses
73.14(234) State monitoring system
73.15(234) Limitations on unrelated
activities
73.16 to 73.20 Reserved

SOUP KITCHEN PROGRAM

73.21(234) Definitions
73.22(234) Distribution of food
73.23(234) Application

73.24(234) Eligibility
73.25(234) Notification of available food
73.26(234) Ordering and delivery
73.27(234) Variations in food distribution
73.28(234) Quality control
73.29(234) Administrative review of denial
of eligibility
73.30(234) Limitations on unrelated
activities
73.31 to 73.40 Reserved
INSTITUTIONAL FOOD PROGRAM
73.41(234) Definitions
73.42(234) Administration
73.43(234) Purpose
73.44(234) Cost of the program
73.45(234) General eligibility requirements
73.46(234) Eligibility requirements for adult
correctional institutions
73.47(234) Extent of eligibility
73.48(234) Distribution
73.49(234) Administrative reviews
73.50(234) Responsibilities of recipient
institutions
73.51(234) Variations in food distribution
73.52(234) Food service companies
73.53(234) Notice of decision
73.54(234) Administrative review of denial
of eligibility
73.55(234) Refusal of commodities upon
delivery
73.56(234) Storage of commodities
73.57(234) Records and reports
73.58(234) Containers
73.59(234) Improper use of USDA donated
food
73.60(234) Food demonstrations and training
programs
73.61(234) Disaster feeding
73.62(234) Food losses

CHAPTER 74
Reserved

TITLE VIII
MEDICAL ASSISTANCE

CHAPTER 75
CONDITIONS OF ELIGIBILITY

DIVISION I
GENERAL CONDITIONS OF ELIGIBILITY, COVERAGE
GROUPS, AND SSI-RELATED PROGRAMS

- 75.1(249A) Persons covered
- 75.2(249A) Medical resources
- 75.3(249A) Acceptance of other financial benefits
- 75.4(249A) Medical assistance lien
- 75.5(249A) Determination of countable income and resources for persons in a medical institution
- 75.6 Reserved
- 75.7(249A) Furnishing of social security number
- 75.8(249A) Medical assistance corrective payments
- 75.9(249A) Treatment of Medicaid qualifying trusts
- 75.10(249A) Residency requirements
- 75.11(249A) Citizenship or alienage requirements
- 75.12(249A) Persons who enter jails or penal institutions
- 75.13(249A) Categorical relatedness
- 75.14(249A) Establishing paternity and obtaining support
- 75.15 Reserved
- 75.16(249A) Client participation in payment for medical institution care
- 75.17(249A) Verification of pregnancy
- 75.18(249A) Continuous eligibility for pregnant women
- 75.19 Reserved
- 75.20(249A) Disability requirements for SSI-related Medicaid
- 75.21(249A) Health insurance premium payment program

- 75.22(249A) AIDS/HIV health insurance premium payment program
- 75.23(249A) Disposal of assets for less than fair market value after August 10, 1993
- 75.24(249A) Treatment of trusts established after August 10, 1993
- 75.25(249A) Definitions
- 75.26 Reserved
- 75.27(249A) AIDS/HIV settlement payments
- 75.28 to 75.49 Reserved

DIVISION II
ELIGIBILITY FACTORS SPECIFIC TO COVERAGE
GROUPS RELATED TO THE FAMILY MEDICAL
ASSISTANCE PROGRAM (FMAP)

- 75.50(249A) Definitions
- 75.51(249A) Reinstatement of eligibility
- 75.52(249A) Continuing eligibility
- 75.53(249A) Iowa residency policies specific to FMAP and FMAP-related coverage groups
- 75.54(249A) Eligibility factors specific to child
- 75.55(249A) Eligibility factors specific to specified relatives
- 75.56(249A) Resources
- 75.57(249A) Income
- 75.58(249A) Need standards
- 75.59(249A) Persons who may be excluded from the eligible group when determining eligibility for the family medical assistance program (FMAP) and FMAP-related coverage groups
- 75.60(249A) Pending SSI approval

CHAPTER 76
APPLICATION AND INVESTIGATION

- 76.1(249A) Application
- 76.2(249A) Information and verification procedure
- 76.3(249A) Time limit for decision
- 76.4(249A) Notification of decision
- 76.5(249A) Effective date
- 76.6(249A) Certification for services
- 76.7(249A) Reinvestigation

- 76.8(249A) Investigation by quality control or the food stamp investigation section of the department of inspections and appeals
- 76.9(249A) Recipient lock-in
- 76.10(249A) Applicant and recipient responsibilities
- 76.11(249A) Automatic redetermination
- 76.12(249A) Recovery
- 76.13(249A) Conversion to the X-PERT system

CHAPTER 77
CONDITIONS OF PARTICIPATION FOR
PROVIDERS OF MEDICAL AND
REMEDIAL CARE

- 77.1(249A) Physicians
- 77.2(249A) Retail pharmacies
- 77.3(249A) Hospitals
- 77.4(249A) Dentists
- 77.5(249A) Podiatrists
- 77.6(249A) Optometrists
- 77.7(249A) Opticians
- 77.8(249A) Chiropractors
- 77.9(249A) Home health agencies
- 77.10(249A) Medical equipment and appliances, prosthetic devices and sickroom supplies
- 77.11(249A) Ambulance service
- 77.12 Reserved
- 77.13(249A) Hearing aid dealers
- 77.14(249A) Audiologists
- 77.15(249A) Community mental health centers
- 77.16(249A) Screening centers
- 77.17(249A) Physical therapists
- 77.18(249A) Orthopedic shoe dealers and repair shops
- 77.19(249A) Rehabilitation agencies
- 77.20(249A) Independent laboratories
- 77.21(249A) Rural health clinics
- 77.22(249A) Psychologists
- 77.23(249A) Maternal health centers
- 77.24(249A) Ambulatory surgical centers
- 77.25(249A) Genetic consultation clinics
- 77.26(249A) Nurse-midwives
- 77.27(249A) Birth centers
- 77.28(249A) Area education agencies
- 77.29(249A) Case management provider organizations
- 77.30(249A) HCBS ill and handicapped waiver service providers
- 77.31(249A) Nurse anesthetists
- 77.32(249A) Hospice providers

- 77.33(249A) HCBS elderly waiver service providers
- 77.34(249A) HCBS AIDS/HIV waiver service providers
- 77.35(249A) Federally qualified health centers
- 77.36(249A) Family or pediatric nurse practitioner
- 77.37(249A) HCBS MR waiver service providers
- 77.38(249A) Rehabilitative treatment service providers
- 77.39(249A) HCBS brain injury waiver service providers
- 77.40(249A) Lead inspection agency providers
- 77.41(249A) HCBS physical disability waiver service providers

CHAPTER 78
AMOUNT, DURATION AND SCOPE OF
MEDICAL AND REMEDIAL SERVICES

- 78.1(249A) Physicians' services
- 78.2(249A) Retail pharmacies
- 78.3(249A) Inpatient hospital services
- 78.4(249A) Dentists
- 78.5(249A) Podiatrists
- 78.6(249A) Optometrists
- 78.7(249A) Opticians
- 78.8(249A) Chiropractors
- 78.9(249A) Home health agencies
- 78.10(249A) Durable medical equipment (DME), prosthetic devices and sickroom supplies
- 78.11(249A) Ambulance service
- 78.12 Reserved
- 78.13(249A) Transportation to receive medical care
- 78.14(249A) Hearing aids
- 78.15(249A) Orthopedic shoes
- 78.16(249A) Community mental health centers
- 78.17(249A) Physical therapists
- 78.18(249A) Screening centers
- 78.19(249A) Rehabilitation agencies
- 78.20(249A) Independent laboratories
- 78.21(249A) Rural health clinics
- 78.22(249A) Family planning clinics
- 78.23(249A) Other clinic services
- 78.24(249A) Psychologists
- 78.25(249A) Maternal health centers
- 78.26(249A) Ambulatory surgical center services
- 78.27(249A) Genetic consultation clinics

- 78.28(249A) List of medical services and equipment requiring prior approval, preprocedure review or preadmission review
- 78.29(249A) Nurse-midwives
- 78.30(249A) Birth centers
- 78.31(249A) Hospital outpatient services
- 78.32(249A) Area education agencies
- 78.33(249A) Case management services
- 78.34(249A) HCBS ill and handicapped waiver services
- 78.35(249A) Certified registered nurse anesthetists
- 78.36(249A) Hospice services
- 78.37(249A) HCBS elderly waiver services
- 78.38(249A) HCBS AIDS/HIV waiver services
- 78.39(249A) Federally qualified health centers
- 78.40(249A) Independently practicing family or pediatric nurse practitioners
- 78.41(249A) HCBS MR waiver services
- 78.42(249A) Rehabilitative treatment services
- 78.43(249A) HCBS brain injury waiver services
- 78.44(249A) Lead inspection services
- 78.45(249A) Teleconsultive services
- 78.46(249A) Physical disability waiver service

CHAPTER 79 OTHER POLICIES RELATING TO PROVIDERS OF MEDICAL AND REMEDIAL CARE

- 79.1(249A) Principles governing reimbursement of providers of medical and health services
- 79.2(249A) Sanctions against provider of care
- 79.3(249A) Maintenance of fiscal and clinical records by providers of service
- 79.4(249A) Appeal by provider of care
- 79.5(249A) Nondiscrimination on the basis of handicap
- 79.6(249A) Provider participation agreement
- 79.7(249A) Medical assistance advisory council
- 79.8(249A) Requests for prior authorization
- 79.9(249A) General provisions for Medicaid coverage applicable to all Medicaid providers and services
- 79.10(249A) Requests for preadmission review
- 79.11(249A) Requests for preprocedure surgical review

- 79.12(249A) Advance directives
- 79.13(249A) Requirements for enrolled Medicaid providers supplying laboratory services
- 79.14(249A) Provider enrollment

CHAPTER 80 PROCEDURE AND METHOD OF PAYMENT

- 80.1(249A) The fiscal agent function in medical assistance
- 80.2(249A) Submission of claims
- 80.3(249A) Amounts paid provider from other sources
- 80.4(249A) Time limit for submission of claims and claim adjustments
- 80.5(249A) Authorization process
- 80.6(249A) Payment to provider—exception

CHAPTER 81 NURSING FACILITIES

DIVISION I GENERAL POLICIES

- 81.1(249A) Definitions
- 81.2 Reserved
- 81.3(249A) Initial approval for nursing facility care
- 81.4(249A) Arrangements with residents
- 81.5(249A) Discharge and transfer
- 81.6(249A) Financial and statistical report
- 81.7(249A) Continued review
- 81.8 Reserved
- 81.9(249A) Records
- 81.10(249A) Payment procedures
- 81.11(249A) Billing procedures
- 81.12(249A) Closing of facility
- 81.13(249A) Conditions of participation for nursing facilities
- 81.14(249A) Audits
- 81.15 Reserved
- 81.16(249A) Nurse aide requirements and training and testing programs
- 81.17 Reserved
- 81.18(249A) Sanctions
- 81.19 Reserved
- 81.20(249A) Out-of-state facilities
- 81.21(249A) Outpatient services
- 81.22(249A) Rates for Medicaid eligibles
- 81.23 to 81.30 Reserved

DIVISION II

ENFORCEMENT OF COMPLIANCE

- 81.31(249A) Definitions
- 81.32(249A) General provisions
- 81.33(249A) Factors to be considered in selecting remedies
- 81.34(249A) Available remedies
- 81.35(249A) Selection of remedies
- 81.36(249A) Action when there is immediate jeopardy
- 81.37(249A) Action when there is no immediate jeopardy
- 81.38(249A) Action when there is repeated substandard quality of care
- 81.39(249A) Temporary management
- 81.40(249A) Denial of payment for all new admissions
- 81.41(249A) Secretarial authority to deny all payments
- 81.42(249A) State monitoring
- 81.43(249A) Directed plan of correction
- 81.44(249A) Directed in-service training
- 81.45(249A) Closure of a facility or transfer of residents, or both
- 81.46(249A) Civil money penalties—basis for imposing penalty
- 81.47(249A) Civil money penalties—when penalty is collected
- 81.48(249A) Civil money penalties—notice of penalty
- 81.49(249A) Civil money penalties—waiver of hearing, reduction of penalty amount
- 81.50(249A) Civil money penalties—amount of penalty
- 81.51(249A) Civil money penalties—effective date and duration of penalty
- 81.52(249A) Civil money penalties—due date for payment of penalty
- 81.53(249A) Civil money penalties—settlement of penalties
- 81.54(249A) Continuation of payments to a facility with deficiencies
- 81.55(249A) State and federal disagreements involving findings not in agreement when there is no immediate jeopardy
- 81.56(249A) Duration of remedies
- 81.57(249A) Termination of provider agreement

CHAPTER 82

INTERMEDIATE CARE FACILITIES
FOR THE MENTALLY RETARDED

- 82.1(249A) Definition

- 82.2(249A) Licensing and certification
- 82.3(249A) Conditions of participation for intermediate care facilities for the mentally retarded
- 82.4 Reserved
- 82.5(249A) Financial and statistical report
- 82.6(249A) Eligibility for services
- 82.7(249A) Initial approval for ICF/MR care
- 82.8(249A) Determination of need for continued stay
- 82.9(249A) Arrangements with residents
- 82.10(249A) Discharge and transfer
- 82.11(249A) Continued stay review
- 82.12(249A) Quality of care review
- 82.13(249A) Records
- 82.14(249A) Payment procedures
- 82.15(249A) Billing procedures
- 82.16(249A) Closing of facility
- 82.17(249A) Audits
- 82.18(249A) Out-of-state facilities
- 82.19(249A) ICF/MR development

CHAPTER 83

MEDICAID WAIVER SERVICES

DIVISION I

HCBS ILL AND HANDICAPPED WAIVER SERVICES

- 83.1(249A) Definitions
- 83.2(249A) Eligibility
- 83.3(249A) Application
- 83.4(249A) Financial participation
- 83.5(249A) Redetermination
- 83.6(249A) Allowable services
- 83.7(249A) Case plan
- 83.8(249A) Adverse service actions
- 83.9(249A) Appeal rights
- 83.10 Reserved
- 83.11(249A) Conversion to the X-PERT system
- 83.12 to 83.20 Reserved

DIVISION II

HCBS ELDERLY WAIVER SERVICES

- 83.21(249A) Definitions
- 83.22(249A) Eligibility
- 83.23(249A) Application
- 83.24(249A) Client participation
- 83.25(249A) Redetermination
- 83.26(249A) Allowable services
- 83.27(249A) Case plan
- 83.28(249A) Adverse service actions
- 83.29(249A) Appeal rights
- 83.30(249A) Enhanced services
- 83.31(249A) Conversion to the X-PERT system
- 83.32 to 83.40 Reserved

DIVISION III	
HCBS AIDS/HIV WAIVER SERVICES	
83.41(249A)	Definitions
83.42(249A)	Eligibility
83.43(249A)	Application
83.44(249A)	Financial participation
83.45(249A)	Redetermination
83.46(249A)	Allowable services
83.47(249A)	Case plan
83.48(249A)	Adverse service actions
83.49(249A)	Appeal rights
83.50(249A)	Conversion to the X-PERT system
83.51 to 83.59	Reserved
DIVISION IV	
HCBS MR WAIVER SERVICES	
83.60(249A)	Definitions
83.61(249A)	Eligibility
83.62(249A)	Application
83.63(249A)	Client participation
83.64(249A)	Redetermination
83.65	Reserved
83.66(249A)	Allowable services
83.67(249A)	Individual comprehensive plan or service plan
83.68(249A)	Adverse service actions
83.69(249A)	Appeal rights
83.70(249A)	County reimbursement
83.71(249A)	Conversion to the X-PERT system
83.72(249A)	Rent subsidy program
83.73 to 83.80	Reserved
DIVISION V	
BRAIN INJURY WAIVER SERVICES	
83.81(249A)	Definitions
83.82(249A)	Eligibility
83.83(249A)	Application
83.84(249A)	Client participation
83.85(249A)	Redetermination
83.86(249A)	Allowable services
83.87(249A)	Individual comprehensive plan
83.88(249A)	Adverse service actions
83.89(249A)	Appeal rights
83.90(249A)	County reimbursement
83.91(249A)	Conversion to the X-PERT system
83.92 to 83.100	Reserved

DIVISION VI	
PHYSICAL DISABILITY WAIVER SERVICES	
83.101(249A)	Definitions
83.102(249A)	Eligibility
83.103(249A)	Application
83.104(249A)	Client participation
83.105(249A)	Redetermination
83.106(249A)	Allowable services
83.107(249A)	Individual service plan
83.108(249A)	Adverse service actions
83.109(249A)	Appeal rights
83.110	Reserved
83.111(249A)	Conversion to the X-PERT system

CHAPTER 84 EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT

84.1(249A)	Definitions
84.2(249A)	Eligibility
84.3(249A)	Screening services
84.4(249A)	Referral
84.5(249A)	Follow up

CHAPTER 85 SERVICES IN PSYCHIATRIC INSTITUTIONS

DIVISION I	
PSYCHIATRIC HOSPITALS	
85.1(249A)	Acute care in psychiatric hospitals
85.2(249A)	Out-of-state placement
85.3(249A)	Eligibility of persons under the age of 21
85.4(249A)	Eligibility of persons aged 65 and over
85.5(249A)	Client participation
85.6(249A)	Responsibilities of hospitals
85.7(249A)	Psychiatric hospital reimbursement
85.8 to 85.20	Reserved
DIVISION II	
PSYCHIATRIC MEDICAL INSTITUTIONS FOR CHILDREN	
85.21(249A)	Conditions for participation
85.22(249A)	Eligibility of persons under the age of 21
85.23(249A)	Client participation
85.24(249A)	Responsibilities of facilities
85.25(249A)	Reimbursement to psychiatric medical institutions for children
85.26(249A)	Outpatient day treatment for persons aged 20 or under
85.27 to 85.40	Reserved

DIVISION III
NURSING FACILITIES FOR PERSONS
WITH MENTAL ILLNESS

- 85.41(249A) Conditions of participation
- 85.42(249A) Out-of-state placement
- 85.43(249A) Eligibility of persons aged 65 and over
- 85.44(249A) Client participation
- 85.45(249A) Responsibilities of nursing facility
- 85.46(249A) Policies governing reimbursement

CHAPTER 86
HEALTHY AND WELL KIDS IN IOWA
(HAWK-I) PROGRAM

- 86.1(514I) Definitions
- 86.2(514I) Eligibility factors
- 86.3(514I) Application process
- 86.4(514I) Coordination with Medicaid
- 86.5(514I) Effective date of coverage
- 86.6(514I) Selection of a plan
- 86.7(514I) Disenrollment
- 86.8(514I) Premiums and copayments
- 86.9(514I) Annual reviews of eligibility
- 86.10(514I) Reporting changes
- 86.11(514I) Notice requirements
- 86.12(514I) Appeals and fair hearings
- 86.13(514I) Third-party administrator
- 86.14(514I) Covered services
- 86.15(514I) Participating health plans
- 86.16(514I) Clinical advisory committee

CHAPTER 87
MEDICAID PROVIDER AUDITS

- 87.1(249A) Definitions
- 87.2(249A) Audit of clinical and fiscal records by the department
- 87.3(249A) Who shall be audited
- 87.4(249A) Auditing procedures
- 87.5(249A) Actions based on audit findings
- 87.6(249A) Appeal by provider of care

CHAPTER 88
MANAGED HEALTH CARE PROVIDERS

DIVISION I
HEALTH MAINTENANCE ORGANIZATION

- 88.1(249A) Definitions
- 88.2(249A) Participation
- 88.3(249A) Enrollment
- 88.4(249A) Disenrollment
- 88.5(249A) Covered services
- 88.6(249A) Emergency and urgent care services
- 88.7(249A) Access to service
- 88.8(249A) Grievance procedures
- 88.9(249A) Records and reports
- 88.10(249A) Marketing
- 88.11(249A) Patient education
- 88.12(249A) Reimbursement
- 88.13(249A) Quality assurance
- 88.14(249A) Contracts with federally qualified health centers (FQHCs) and rural health clinics (RHCs)
- 88.15 to 88.20 Reserved

DIVISION II
PREPAID HEALTH PLANS

- 88.21(249A) Definitions
- 88.22(249A) Participation
- 88.23(249A) Enrollment
- 88.24(249A) Disenrollment
- 88.25(249A) Covered services
- 88.26(249A) Emergency services
- 88.27(249A) Access to service
- 88.28(249A) Grievance procedures
- 88.29(249A) Records and reports
- 88.30(249A) Marketing
- 88.31(249A) Patient education
- 88.32(249A) Payment to the PHP
- 88.33(249A) Quality assurance
- 88.34 to 88.40 Reserved

DIVISION III
MEDICAID PATIENT MANAGEMENT

- 88.41(249A) Definitions
- 88.42(249A) Eligible recipients
- 88.43(249A) Project area
- 88.44(249A) Eligible providers
- 88.45(249A) Contracting for the provision of
patient management
- 88.46(249A) Enrollment and changes in
enrollment
- 88.47(249A) Disenrollment
- 88.48(249A) Services
- 88.49(249A) Grievance procedure
- 88.50(249A) Payment
- 88.51(249A) Utilization review and quality
assessment
- 88.52(249A) Marketing
- 88.53 to 88.60 Reserved

DIVISION IV
IOWA PLAN FOR BEHAVIORAL HEALTH

- 88.61(249A) Definitions
- 88.62(249A) Participation
- 88.63(249A) Enrollment
- 88.64(249A) Disenrollment
- 88.65(249A) Covered services
- 88.66(249A) Emergency services
- 88.67(249A) Access to service
- 88.68(249A) Review of contractor decisions
and actions
- 88.69(249A) Records and reports
- 88.70(249A) Marketing
- 88.71(249A) Enrollee education
- 88.72(249A) Payment to the contractor
- 88.73(249A) Claims payment
- 88.74(249A) Quality assurance
- 88.75(249A) Iowa Plan advisory committee